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PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	Filed concurrently herewith
First Named Inventor	W. Jeffrey Knowles
Title	System and Method of Account .
Group Art Unit	
Examiner Name	
Attorney Docket Number	670744.00005

I hereby appoint:

☒ Practitioners at Customer Number 26707 → ☐

OR

☐ Practitioner(s) named below:

Place Customer Bar Code Label here

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

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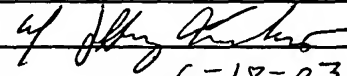
Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	W. Jeffrey Knowles
Signature	
Date	6-18-03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted.

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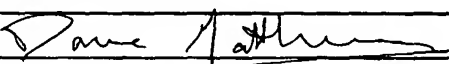
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### SIGNATURE of Applicant or Assignee of Record

Name	David J. Matthews
Signature	
Date	18-Jun-03

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Application Number	
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First Named Inventor	W. Jeffrey Knowles
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Group Art Unit	
Examiner Name	
Attorney Docket Number	670744.00005

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name

Russell Hales Day

Signature

*Russell H. Day*

Date

6/18/03

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.18 (e)) required)

Attorney Docket Number 870744.00005

First Named Inventor W. Jeffrey Knowles

**COMPLETE IF KNOWN**

Application Number

Filing Date

Filed concurrently

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEM AND METHOD OF ACCOUNT RECONCILIATION FOR ELECTRONIC TRANSACTIONS**

(Title of the invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

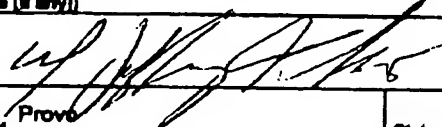

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/BB/026 attached hereto:

(Page 1 of 2)

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## DECLARATION — Utility or Design Patent Application

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Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		W. Jeffrey		Family Name Knowles or Surname	
Inventor's Signature				Date 7-23-03	
Residence: City		Provo	State	UT	Country
				USA	Citizenship
					US
Mailing Address					
Mailing Address 4394 Stafford Ct					
City		Provo	State	UT	Country
				ZIP	84804
					USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		David J.		Family Name Matthews or Surname	
Inventor's Signature				Date 23-Jul-03	
Residence: City		London	State	UT	Country
				USA	Citizenship
					US
Mailing Address					
Mailing Address 239 Queensland Court					
City		London	State	UT	Country
				ZIP	84042
					USA
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/D2A attached hereto.					

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>1</u> of <u>2</u>
--------------------	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Russell Hales		Day	
Inventor's Signature <i>Russell Hales</i>		Date <u>7/23/03</u>	
Residence: City Provo	State UT	Country USA	Citizenship US
Mailing Address			
Mailing Address 811 W. 1975 N.			
City Provo	State UT	ZIP 84604	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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